



**Kansas City**

RECEIVED  
FEC MAIL CENTER  
2016 JUL 28 PM 4:00

July 12, 2016

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Re: Blue Cross and Blue Shield of Kansas City  
Federal Political Action Committee  
FEC No. C00301358  
FEC Form 3x- April 1, 2016 to June 30, 2016 Quarterly Report

Dear Sir or Madam:

Enclosed for filing is an original FEC Form 3X- Reports of Receipts and Disbursements, submitted on behalf of Blue Cross and Blue Shield of Kansas City Federal Political Action Committee. This report covers committee activity from April 1, 2016 through June 30, 2016.

If you have any questions, please feel free to contact me at (816)395-2807 or by e-mail at [Melissa.panettiere@bluekc.com](mailto:Melissa.panettiere@bluekc.com).

Sincerely,

Melissa Panettiere  
Director of Government Relations

Enclosure

Cc: Coni K. Fries, Committee Treasurer

**2301 MAIN STREET**  
KANSAS CITY, MO 64108  
**(816) 395-2222 | BlueKC.com**

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2016 JUL 28 PM 4:00

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Blue Cross & Blue Shield of Kansas City  
Federal Political Action Committee

ADDRESS (number and street) 2301 Main Street

Check if different than previously reported. (ACC)

Kansas City MO 64108

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00301358

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)
  - Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
  - Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)  General (12G)  Runoff (12R)
  - Convention (12C)  Special (12S)

Election on MM / DD / YYYY in the State of  

- (d) 30-Day POST-Election Report for the:
- General (30G)  Runoff (30R)  Special (30S)

Election on MM / DD / YYYY in the State of  

5. Covering Period 04 / 01 / 2016 through 06 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Coni K. Fries

Signature of Treasurer Coni Fries

Date 07 / 12 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

|                 |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|

**FEC FORM 3X**  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

Report Covering the Period: From:  /  /  To:  /  /

|   | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|---|--|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2016"/>                                       |  | <input type="text" value="9,276.53"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....   | <input type="text" value="9,776.53"/>  |  |
| (c) Total Receipts (from Line 19) .....   | <input type="text" value="1,8750.00"/> | <input type="text" value="19,250.00"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....      | <input type="text" value="2,8526.53"/> | <input type="text" value="2,8526.53"/> |
| 7. Total Disbursements (from Line 31) .....   | <input type="text" value="1,2000.00"/> | <input type="text" value="1,2000.00"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                 | <input type="text" value="1,6526.53"/> | <input type="text" value="1,6526.53"/> |
| 9. Debts and Obligations Owed TO<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |  |
| 10. Debts and Obligations Owed BY<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="0.00"/>      |  |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

Report Covering the Period: From: M M M / D D D / Y Y Y Y Y Y 0 4 / 0 1 / 2 0 1 6 To: M M M / D D D / Y Y Y Y Y Y 0 6 / 3 0 / 2 0 1 6

**I. Receipts**

**COLUMN A  
Total This Period**

**COLUMN B  
Calendar Year-to-Date**

|   |                 |                 |
|---|-----------------|-----------------|
| 11. Contributions (other than loans) From:  |                 |                 |
| (a) Individuals/Persons Other Than Political Committees   |                 |                 |
| (i) Itemized (use Schedule A).....  | 1 3, 7 5 0. 0 0 | 1 4, 2 5 0. 0 0 |
| (ii) Unitemized.....  |                 |                 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 1 3, 7 5 0. 0 0 | 1 4, 2 5 0. 0 0 |
| (b) Political Party Committees.....   |                 |                 |
| (c) Other Political Committees (such as PACs).....  |                 |                 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶  | 1 3, 7 5 0. 0 0 | 1 4, 2 5 0. 0 0 |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0. 0 0          |                 |
| 13. All Loans Received.....   | 0. 0 0          |                 |
| 14. Loan Repayments Received.....   | 0. 0 0          |                 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0. 0 0          |                 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 5, 0 0 0. 0 0   | 5, 0 0 0. 0 0   |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 0. 0 0          |                 |
| 18. Transfers from Non-Federal and Levin Funds  |                 |                 |
| (a) Non-Federal Account (from Schedule H3).....   | 0. 0 0          |                 |
| (b) Levin Funds (from Schedule H5).....   | 0. 0 0          |                 |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0. 0 0          |                 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶                         | 1 8, 7 5 0. 0 0 | 1 9, 2 5 0. 0 0 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 0. 0 0          | 0. 0 0          |

NON-FEDERAL AND LEVIN FUNDS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:   |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                   |                               |                                   |
| (i) Federal Share .....   | 0.00                          | 0.00                              |
| (ii) Non-Federal Share .....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....  | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                         | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees .....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees .....         | 12,000.00                     | 12,000.00                         |
| 24. Independent Expenditures (use Schedule E) .....   | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made .....  | 0.00                          | 0.00                              |
| 27. Loans Made .....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                   | 0.00                          | 0.00                              |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....   | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C. §431(20))   |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                      |                               |                                   |
| (i) Federal Share .....   | 0.00                          | 0.00                              |
| (ii) "Levin" Share .....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                            | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....             | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .....    | 12,000.00                     | 12,000.00                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ..... | 0.00                          | 0.00                              |

NON-FEDERAL SHARE

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 1 3 7 5 0 0 0                 | 1 4 2 5 0 0 0                     |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0 0 0                         | 0 0 0                             |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 0 0 0                         | 0 0 0                             |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0 0 0                         | 0 0 0                             |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....                | 0 0 0                         | 0 0 0                             |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 0 0 0                         | 0 0 0                             |

11-11-2003 10:00:00 AM

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 1 OF 6  
(check only one)

|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Blue Cross Blue Shield of Kansas City Federal Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Wilson, Danette**  
Mailing Address  
2301 Main Street  
City: Kansas City State: MO Zip Code: 64108  
FEC ID number of contributing federal political committee: **C 00301358**  
Name of Employer: BCBS of Kansas City Occupation: President & CEO  
Receipt For:  Primary  General  Other (specify)   
Annual Contribution

Date of Receipt: 04 / 01 / 2016  
Amount of Each Receipt this Period: 2,000.00  
Aggregate Year-to-Date: 2,000.00

Full Name (Last, First, Middle Initial)

**B. Schneider-Stucky, Erin**  
Mailing Address  
2301 Main Street  
City: Kansas City State: MO Zip Code: 64108  
FEC ID number of contributing federal political committee: **C 00301358**  
Name of Employer: BCBS of Kansas City Occupation: Senior Vice President  
Receipt For:  Primary  General  Other (specify)   
Annual Contribution

Date of Receipt: 04 / 04 / 2016  
Amount of Each Receipt this Period: 1,500.00  
Aggregate Year-to-Date: 1,500.00

Full Name (Last, First, Middle Initial)

**C. Creasy, Nancy**  
Mailing Address  
2301 Main Street  
City: Kansas City State: MO Zip Code: 64108  
FEC ID number of contributing federal political committee: **C 00301358**  
Name of Employer: BCBS of Kansas City Occupation: Senior Vice President  
Receipt For:  Primary  General  Other (specify)   
Annual Contribution

Date of Receipt: 04 / 04 / 2016  
Amount of Each Receipt this Period: 1,500.00  
Aggregate Year-to-Date: 1,500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 5,000.00  
**TOTAL** This Period (last page this line number only).....▶

20160417 10:00:00 AM

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 2 OF 6 |                              |                             |                             |                             |                             |                             |                             |
|   | (check only one)             |                              |                             |                             |                             |                             |                             |                             |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
Blue Cross Blue Shield of Kansas City Federal Political Action Committee

|  |                                    |   |  |
|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br>A. <u>Fries, Coni</u>   |                                    | Date of Receipt<br>MM / DD / YYYY<br>04 / 04 / 2016 |  |
| Mailing Address<br>2301 Main Street  |                                    | Amount of Each Receipt this Period<br>500.00        |  |
| City<br>Kansas City  | State<br>MO                        | Zip Code<br>64108                                   |  |
| FEC ID number of contributing federal political committee.<br>C 00301358   |                                    |   |  |
| Name of Employer<br>BCBS of Kansas City  | Occupation<br>Vice President       |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00 |   |  |
| Annual Contribution  |                                    |   |  |

|  |                                    |   |  |
|--|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br>B. <u>Johnson, Debra</u>  |                                    | Date of Receipt<br>MM / DD / YYYY<br>04 / 04 / 2016 |  |
| Mailing Address<br>2301 Main Street  |                                    | Amount of Each Receipt this Period<br>250.00        |  |
| City<br>Kansas City  | State<br>MO                        | Zip Code<br>64108                                   |  |
| FEC ID number of contributing federal political committee.<br>C 00301358   |                                    |   |  |
| Name of Employer<br>BCBS of Kansas City  | Occupation<br>Dept. Vice President |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00 |   |  |

|  |                                      |   |  |
|--|--------------------------------------|---|--|
| Full Name (Last, First, Middle Initial)<br>C. <u>Kastner, Richard</u>  |                                      | Date of Receipt<br>MM / DD / YYYY<br>04 / 11 / 2016 |  |
| Mailing Address<br>2301 Main Street  |                                      | Amount of Each Receipt this Period<br>1,500.00      |  |
| City<br>Kansas City  | State<br>MO                          | Zip Code<br>64108                                   |  |
| FEC ID number of contributing federal political committee.<br>C 00301358   |                                      |   |  |
| Name of Employer<br>BCBS of Kansas City  | Occupation<br>General Counsel & CAO  |   |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1,500.00 |   |  |
| Annual Contribution  |                                      |   |  |

|  |          |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....           | 2,250.00 |
| TOTAL This Period (last page this line number only)..... | 7,250.00 |

11-11-2003 10:00:00 AM

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3 OF 6

(check only one)

|   |                              |                              |                             |                             |                             |                             |                             |                             |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)

Blue Cross and Blue Shield of Kansas City Federal Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Nightingale, Tom**

Mailing Address

2301 Main Street

City

Kansas City

State

MO

Zip Code

64108

FEC ID number of contributing federal political committee.

C 00301358

Name of Employer

BCBS of Kansas City

Occupation

Vice President

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 11 / 2016

Amount of Each Receipt this Period

500.00

Annual Contribution

Full Name (Last, First, Middle Initial)

**B. Schatz, Brian**

Mailing Address

2301 Main Street

City

Kansas City

State

MO

Zip Code

64108

FEC ID number of contributing federal political committee.

C 00301358

Name of Employer

BCBS of Kansas City

Occupation

Dept. Vice President

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 11 / 2016

Amount of Each Receipt this Period

250.00

Annual Contribution

Full Name (Last, First, Middle Initial)

**C. Camerlinck, Bryan**

Mailing Address

2301 Main Street

City

Kansas City

State

MO

Zip Code

64108

FEC ID number of contributing federal political committee.

C 00301358

Name of Employer

BCBS of Kansas City

Occupation

Chief Financial Officer

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,500.00

Date of Receipt

04 / 14 / 2016

Amount of Each Receipt this Period

1,500.00

Annual Contribution

SUBTOTAL of Receipts This Page (optional).....

2,250.00

TOTAL This Period (last page this line number only).....

9,500.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |   |                                    |                                    |                                   |                             |  |
|---|---|------------------------------------|------------------------------------|-----------------------------------|-----------------------------|--|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 4 OF 6                  |                                    |                                    |                                   |                             |  |
|   | <input checked="" type="checkbox"/> 11a<br>13 | <input type="checkbox"/> 11b<br>14 | <input type="checkbox"/> 11c<br>15 | <input type="checkbox"/> 12<br>16 | <input type="checkbox"/> 17 |  |

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NAME OF COMMITTEE (In Full)  
**Blue Cross Blue Shield of Kansas City Federal Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Reichmuth, Joseph**

Mailing Address  
**2301 Main Street**

City **Kansas City** State **MO** Zip Code **64108**

FEC ID number of contributing federal political committee. **C 0 0 3 0 1 3 5 8**

Name of Employer **BCBS of Kansas City** Occupation **Dept. Vice President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2 5 0 . 0 0**

Annual Contribution

Date of Receipt  
**0 4 / 1 4 / 2 0 1 6**

Amount of Each Receipt this Period  
**2 5 0 . 0 0**

Full Name (Last, First, Middle Initial)  
**B. Frazier, Dan**

Mailing Address  
**2301 Main Street**

City **Kansas City** State **MO** Zip Code **64108**

FEC ID number of contributing federal political committee. **C 0 0 3 0 1 3 5 8**

Name of Employer **BCBS of Kansas City** Occupation **Dept. Vice President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2 5 0 . 0 0**

Annual Contribution

Date of Receipt  
**0 4 / 1 4 / 2 0 1 6**

Amount of Each Receipt this Period  
**2 5 0 . 0 0**

Full Name (Last, First, Middle Initial)  
**C. McDaniel, Kirby**

Mailing Address  
**2301 Main Street**

City **Kansas City** State **MO** Zip Code **64108**

FEC ID number of contributing federal political committee. **C 0 0 3 0 1 3 5 8**

Name of Employer **BCBS of Kansas City** Occupation **Dept. Vice President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2 5 0 . 0 0**

Annual Contribution

Date of Receipt  
**0 4 / 1 4 / 2 0 1 6**

Amount of Each Receipt this Period  
**2 5 0 . 0 0**

**SUBTOTAL** of Receipts This Page (optional)..... **7 5 0 . 0 0**

**TOTAL** This Period (last page this line number only)..... **1 0 , 2 5 0 . 0 0**

NON-FEDERAL POLITICAL COMMITTEE

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 6

(check only one)

|   |                              |                              |                             |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
|   |                              |                              | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Kansas City Federal Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Burns, Brian**

Mailing Address

2301 Main Street

City

Kansas City

State

MO

Zip Code

64108

FEC ID number of contributing federal political committee.

C 00301358

Name of Employer

BCBS of Kansas City

Occupation

Senior Vice President

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,500.00

Date of Receipt

04 / 22 / 2016

Amount of Each Receipt this Period

1,500.00

Annual Contribution

Full Name (Last, First, Middle Initial)

**B. Berry, Jeff**

Mailing Address

2301 Main Street

City

Kansas City

State

MO

Zip Code

64108

FEC ID number of contributing federal political committee.

C 00301358

Name of Employer

BCBS of Kansas City

Occupation

Vice President

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 22 / 2016

Amount of Each Receipt this Period

500.00

Annual Contribution

Full Name (Last, First, Middle Initial)

**C. Powell, Wayne**

Mailing Address

2301 Main Street

City

Kansas City

State

MO

Zip Code

64108

FEC ID number of contributing federal political committee.

C 00301358

Name of Employer

BCBS of Kansas City

Occupation

Vice President

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 02 / 2016

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

2,500.00

TOTAL This Period (last page this line number only).....

12,750.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |   |                                    |                                    |                                   |                             |
|---|---|------------------------------------|------------------------------------|-----------------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 6 OF 6                  |                                    |                                    |                                   |                             |
|   | <input checked="" type="checkbox"/> 11a<br>13 | <input type="checkbox"/> 11b<br>14 | <input type="checkbox"/> 11c<br>15 | <input type="checkbox"/> 12<br>16 | <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Blue Cross Blue Shield of Kansas City Federal Political Action Committee**

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Rowe, Ron</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 06 / 2016</b> |
| Mailing Address<br><b>2301 Main Street</b>   |   | Amount of Each Receipt this Period<br><b>500.00</b>        |
| City<br><b>Kansas City</b>   | State Zip Code<br><b>MO 64108</b>         |  |
| FEC ID number of contributing federal political committee.<br><b>C 00301358</b>  |   | Annual Contribution  |
| Name of Employer<br><b>BCBS of Kansas City</b>   | Occupation<br><b>Vice President</b>       |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>500.00</b> |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Kaercher, David</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 06 / 2016</b> |
| Mailing Address<br><b>2301 Main Street</b>   |   | Amount of Each Receipt this Period<br><b>500.00</b>        |
| City<br><b>Kansas City</b>   | State Zip Code<br><b>MO 64108</b>         |  |
| FEC ID number of contributing federal political committee.<br><b>C 00301358</b>  |   | Annual Contribution  |
| Name of Employer<br><b>BCBS of Kansas City</b>   | Occupation<br><b>Vice President</b>       |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>500.00</b> |  |

|  |   |  |
|--|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Friends of John Boehner</b>   |   | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 26 / 2016</b> |
| Mailing Address<br><b>228 S. Washington Street, Suite 115</b>  |   | Amount of Each Receipt this Period<br><b>5,000.00</b>      |
| City<br><b>Washington</b>  | State Zip Code<br><b>DC 20006</b>           |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>   |   | Reimbursement  |
| Name of Employer   | Occupation                                  |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>5,000.00</b> |  |

|  |                 |
|--|-----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>6,000.00</b> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <b>1,875.00</b> |

2016-05-26 10:00:00 AM

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Kansas City Federal Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Lynn Jenkins for Congress

Date of Disbursement

Mailing Address

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 0 6   | 2 8   | 2 0 1 6     |

P.O. Box 1441

City State Zip Code  
Topeka KS 66601

Purpose of Disbursement

Amount of Each Disbursement this Period

Contribution

|     |
|-----|
| 1 1 |
|-----|

|          |
|----------|
| 2,000.00 |
|----------|

Candidate Name

Lynn Jenkins

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B.** Blue PAC

Date of Disbursement

Mailing Address

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
| 0 4   | 1 1   | 2 0 1 6     |

1310 G. Street NW

City State Zip Code  
Washington DC 20005

Purpose of Disbursement

Amount of Each Disbursement this Period

Lobbying

|     |
|-----|
| 1 1 |
|-----|

|           |
|-----------|
| 10,000.00 |
|-----------|

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Annual Contribution

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

|       |       |             |
|-------|-------|-------------|
| M M M | D D D | Y Y Y Y Y Y |
|       |       |             |

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

|  |
|--|
|  |
|--|

|  |
|--|
|  |
|--|

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

|          |
|----------|
| 1,200.00 |
|----------|

TOTAL This Period (last page this line number only).....▶

|          |
|----------|
| 1,200.00 |
|----------|

20160710 10:00 AM 000000118



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

NON-FEDERAL ELECTION DOCUMENT

|  |   |
|--|---|
| <input type="checkbox"/> Hand Delivered  | Date of Receipt                                     |
| <input type="checkbox"/> USPS First Class Mail                                       | Date of Receipt                                     |
| <input type="checkbox"/> USPS Registered/Certified                                   | Postmarked (R/C)                                    |
| <input type="checkbox"/> USPS Priority Mail  | Postmarked  |
| <input type="checkbox"/> USPS Priority Mail Express                                  | Postmarked  |
| <input type="checkbox"/> Postmark Illegible  |   |
| <input type="checkbox"/> No Postmark   |   |
| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <b>UPS</b> | Shipping Date<br><b>7/19/16</b>                     |
|  | Next Business Day Delivery <input type="checkbox"/> |
| <input type="checkbox"/> Received from House Records & Registration Office           | Date of Receipt                                     |
| <input type="checkbox"/> Received from Senate Public Records Office                  | Date of Receipt                                     |
| <input type="checkbox"/> Received from Electronic Filing Office                      | Date of Receipt                                     |
| <input type="checkbox"/> Other (Specify):  | Date of Receipt or Postmarked                       |



PREPARER  
(3/2015)

**7/29/16**  
DATE PREPARED